

DPD

700 5th Ave Ste 2000, PO Box 34019
Seattle, WA 98124-4019
(206) 684 -8600

Service Request Detail**Report Date** 08/16/2011 10:51 AM**Submitted By**

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Service # 37172
Problem ZONE VIOLATION OF THE LAND USE CODE
Address 9804 LAKE CITY WAY NE
SEATTLE WA

Call Date 08/03/2011 10:50**Taken By** HARTSTG HARTSTROM, GRETA**Source** CITZ☒ **Customer Contact Requested****Service Request Progress****Schedule** (resolved)**Inspect** Inspected from 08/05/2011 12:00 AM to 08/05/2011 12:00 AM by ANDERSOC CAROL ANDERSON.**Resolve** Resolved at 08/08/2011 08:21 AM with code NVIOL NO VIOLATION. No work orders are required.**Priority****Responsibility****Project****Budget #****Duration of Call** 00:00**# of Calls** 1**Location****Area****District****Parcel** DV0006813**Template Type****Asset****Sub-Area****Map #****A/P #****Primary Caller**

Name FLANEGAN
First,MI MARY ELLEN,
Address

Title

City
State/Province

Country**E-Mail****Day Phone** (206)310-6659 x**Call Date** 08/03/2011 10:50**Comments**

Does medical marijuana dispensary have proper permits to operate?

ZIP/PC**Reference #**☐ **Foreign****Evening Phone****Taken By** HARTSTG**Call List**

There are no additional callers for this service number

Comments

no violation_

this is dispensary which has proper use permits and current usiness license.

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Service Request

Complainant Information

Confidentiality Requested Y

Complainant Capacity OTHER

Owner Manager Contacted N

Assignment

Assigned To Assigned Date
ANDERSOC 08/04/2011

Property Information

No. of Residential Units 0

ZIP Code 98115

Assessor's Parcel No.

Primary Zone C1-40

Additional Zones

ECA Site N

Responsible Party Information

Responsible Party Information
Capacity Name

Address

Phone

OWNER AP Simon 2007 148th St SE., Mill Creek, WA 98012-8246 206.697.7703

Inspected

Resolution

By	Date	Time	Code	Date	Time
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Scheduled Resources

Employee ID Scheduled Start Scheduled End Work Description

No resources scheduled.

Equipment ID Scheduled Start Scheduled End Work Description

No resources scheduled.

Vehicle ID Scheduled Start Scheduled End Work Description

No resources scheduled.



Complaint Information Report

Print Date: 8/15/11
Page 1 of 1

Service Request #: 37172
Address: 9804 LAKE CITY WAY NE

Inspector: ANDERSOC
Complaint Date: 8/3/11
Resolution Date: 8/8/11

Complaint Type: ZONE
Resolution Code: NVIOL

<u>Date</u>	<u>Made By</u>	<u>Event</u>	<u>Tool</u>	<u>Outcome</u>	<u>Event Detail</u>	<u>COMMENTS</u>
8/3/11	HARTSTG	COMPLAINT MADE				Does medical marijuana dispensary have proper permits to operate?
8/4/11	ANDERSOC	RESEARCH				to techs for permit and ownership research
8/5/11	ANDERSOC	COMPLAINT INSPECTION				no violation_ this is dispensary which has proper use permits and current usiness license.
8/8/11	ANDERSOC	COMPLAINT RESOLVED		NO VIOLATION		Ownership research completed. File back to inspector.
8/9/11	HARTSTG	RESEARCH				

